

MORRISON | FOERSTER

12531 HIGH BLUFF DRIVE
SUITE 100
SAN DIEGO, CALIFORNIA
92130-2040

TELEPHONE: 858.720.5100
FACSIMILE: 858.720.5125

WWW.MOFO.COM

MORRISON & FOERSTER LLP
NEW YORK, SAN FRANCISCO,
LOS ANGELES, PALO ALTO,
SAN DIEGO, WASHINGTON, D.C.

DENVER, NORTHERN VIRGINIA,
ORANGE COUNTY, SACRAMENTO,
WALNUT CREEK, CENTRAL

TOKYO, LONDON, BEIJING,
SHANGHAI, HONG KONG,
SINGAPORE, BRUSSELS

**RECEIVED
CENTRAL FAX CENTER**

NOV 14 2005

TO:	FACSIMILE:	TELEPHONE:
U.S. Patent and Trademark Office MS AF	(571) 273-8300	

FROM: James J. Mullen III, Ph.D. - Reg. No. 44,957 **DATE:** November 14, 2005

Number of pages with cover page: <u>6</u>	Originals or hard copy will <u>not</u> follow.
---	--

Preparer of this slip has confirmed that facsimile number given is correct: 10598/gly1

If you do not receive all pages, please call (858) 720-7972 as soon as possible.

CAUTION - CONFIDENTIAL

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (858) 720-7972 and send the original transmission to us by return mail at the address below.

This facsimile contains confidential information which may also be privileged. Unless you are the addressee (or authorized to receive for the addressee), you may not copy, use, or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

Comments:

ATTORNEY DOCKET: 511582002500
GROUP ART UNIT: 1647
EXAMINER: B. Bunner
SERIAL NO.: 10/024,652
FILING DATE: December 17, 2001
INVENTOR(S): Pia M. CHALLITA-EID et al.
TITLE: NUCLEIC ACID AND ENCODED ZINC TRANSPORTER
PROTEIN ENTITLED 108P5H8 USEFUL IN TREATMENT
AND DETECTION OF CANCER

Papers attached:

1. Transmittal (1 page)
2. Fee Transmittal (1 page + duplicate for fee processing)
3. Petition for Extension of Time (1 page)
4. Notice of Appeal (1 page)

**RECEIVED
OIEP/AP**

NOV 15 2005

**IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL
GRACE YU AT (858) 720-7972 AS SOON AS POSSIBLE.**

NOV 14 2005

PTO/SB/21 (08-04)

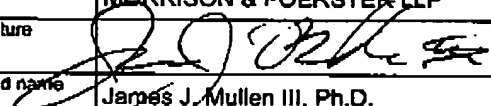
Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/024,652
		Filing Date	December 17, 2001
		First Named Inventor	Pia M. CHALLITA-EID
		Art Unit	1647
		Examiner Name	B. Bunner
Total Number of Pages in This Submission	6	Attorney Docket Number	511582002500

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate for fee processing) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) (Notice of Appeal - 1 page) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile coversheet (1 page)
Remarks Customer No. 36327		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	James J. Mullen III, Ph.D.		
Date	November 14, 2005	Reg. No.	44,957

I hereby certify that this correspondence is being facsimile transmitted to MS AF of the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: November 14, 2005	Signature:  (Grace Yu)

sd-289035

NOV 14 2005

PTO/SB/17 (12-04v2)

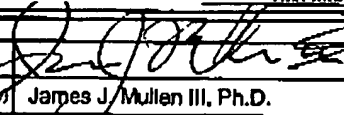
Approved for use through 7/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/01/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4181). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 10/024,852	Filing Date December 17, 2001
TOTAL AMOUNT OF PAYMENT (\$) 535.00		First Named Inventor Pia M. CHALLITA-EID	Examiner Name B. Bunner
		Art Unit 1647	Attorney Docket No. 511582002500

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
Total Claims Extra Claims Fee (\$) Fee Paid (\$)							Multiple Dependent Claims
- - x = 0.00							Fee (\$) Fee Paid (\$)
							0.00
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
- - x = 0.00							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- - = 100		/50	(round up to a whole number) x		= 0.00		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							0.00
Other (e.g., late filing surcharge): 2401 Notice of appeal							250.00
2253 Extension for response within third month							285.00
*Two month extension available for small entity							

SUBMITTED BY			
Signature 	Registration No. (Attorney/Agent) 44,957	Telephone (858) 720-7940	Date November 14, 2005
Name (Print/Type) James J. Mullen III, Ph.D.			

sd-289034